

PART B - FEE(S) TRANSMITTAL

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23363 7590 10/17/2007

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Lindsey Lin		(Depositor's name)
		(Signature)
December 28, 2007		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/694,079	10/20/2000	JON DAKSS	G476:50789	7895

TITLE OF INVENTION: METHOD AND APPARATUS FOR HYPERLINKING IN A TELEVISION BROADCAST

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$0	\$0	\$1440	01/17/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS	
KOENIG, ANDREW Y	2623	725-109000	01/02/2008 NNGUYEN2 00000020 09694079 01 FC:1501 1440.00 OP 02 FC:0001 30.00 OP

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
1 <u>Christie, Parker & Hale, LLP.</u> 2 _____ 3 _____	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

GoldPocket Interactive, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Los Angeles, California

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
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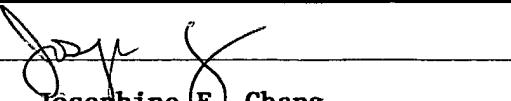
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-1728 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Date **December 28, 2007**

Typed or printed name

Josephine E. Chang

Registration No. **46,083**

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